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CONFIRMATION NO. 7356

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APPLICANTS

Chris R. Roberts, Skaneateles, NY;

Allan I. Krauter, Skaneateles, NY;
Michael A. Pasik, Auburn, NY; John R. Strom, Moravia, NY;
Peter J. Davis, Skaneateles, NY;

** CONTINUING DATA *****

This appln claims benefit of 60/394,501 07/09/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 09/29/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged Examiner's Signature	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 5
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ADDRESS

20874
WALL MARJAMA & BILINSKI
101 SOUTH SALINA STREET
SUITE 400
SYRACUSE, NY
13202

TITLE
Medical diagnostic instrument

All Fees

FILING FEE RECEIVED 1336	No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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